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# **Federal Communications Commission**

Approved by OMB 3060-0999 See instructions for public burden estimate.

# Hearing Aid Compatibility Status Report (FCC Form 655)

Reporting Period: January 1, 2014 - December 31, 2014 Filing Confirmation Number: 0006611171

Filing Deadline: January 15, 2015 FRN: 0003766201

Filing Date: 01/08/2015 11:47 AM

# **General Report Information**

#### **Type of Company**

Service Provider

#### **De Minimis Exception**

Did you offer any handsets to subscribers in the United States during the reporting period? Yes

Have you been offering handsets in the United States for at least three years prior to the end of the reporting period? Yes

Date that you began offering handsets in the United States

Are you a small entity? Yes

Were you a small entity at any time during the three years prior to the end of the reporting period?

Date that you ceased to be a small entity?

#### **Company Information**

Company Name: Blanca Telephone Company Brand Names: Blanca Telephone Company

PO Box: 1138

Street Address: 129 Santa Fe
City: Alamosa
State: CO
Zip Code: 81101

Contact Name: Timothy Welch Contact Phone: (202) 857-1470 Contact Fax: (301) 622-2864

Contact Email: welchlaw@earthlink.net

#### **Filing Agent**

Is this report being filed by an agent on behalf of a manufacturer or service provider? No

#### **Product Labeling**

Do all hearing aid-compatible handsets include labeling? Yes

Explain:

Do all hearing aid-compatible handsets that are capable of voice communication over any air interface or frequency

band that does not have hearing aid compatibility technical standards under ANSI C63.19-2007 include the required language disclosing that the handset has not been rated for hearing aid compatibility with respect to such operations? N/A

Explain:

Do all hearing aid-compatible handsets that the manufacturer also tested and found not to meet hearing aid compatibility requirements under ANSI C63.19-2011 for one or more operations that are not covered under ANSI C63.19-2007, include language informing users by clear and effective means that the handset does not meet the relevant rating or ratings with respect to such operation(s)?

N/A

Explain:

Do all handsets that are capable of use for Voice over LTE, and that were certified for inductive coupling capability under ANSI C63.19-2011 without being tested for inductive coupling capability over VoLTE, include language disclosing that they were not tested with respect to this operation?

N/A

Explain:

Do all handsets that meet the criteria for an M3 rating by allowing the user to reduce the maximum power for GSM operation in the 1900 MHz band include the required disclosure?

Explain:

#### **Public Website**

Does your company maintain a public website describing all hearing aid-compatible models, the ratings of those models, and an explanation of the rating system? No

Website address:

Explain: de minimis provider exempted via section 20.19(e)

#### **Consumer Outreach**

Describe consumer outreach efforts in the past 12 months: de minimis provider exempted via section 20.19(e)

#### Methodology for Functionality Levels

de minimis provider exempted via section 20.19(e)

## **Report Remarks**

You have reported the following handset model summary information.

Total number of handsets offered: 2

Air Interface	Fully Hearing Aid Compatible Number Percent	Acoustic Coupling Compatible Only Number Percent	Non-Compliant Handsets Number Percent	Total by Air Interface
CDMA	2 100%			2

# Handset 1: Huawei Ascend Q (M660)

#### **Handset Maker**

Huawei

Handset Model Name FCC ID
Ascend Q (M660) QISM660

#### Air Interfaces/Frequency Bands

850 MHz CDMA 1700 MHz CDMA 1900 MHz CDMA

#### **Dates**

This handset model was offered from: 01/14 to 12/14

#### **Ratings**

M-Rating: M4

T-Rating: T4

Did this handset meet the criteria for an M3 rating for operations over GSM at 1900 MHz by enabling the user optionally to reduce the maximum power at which the handset will operate by no more than 2.5 decibels, except for emergency calls to 911?

#### **Functionality Level**

de minimis provider

#### **Remarks**

# Handset 2: Kyocera S2100 Luno

## **Handset Maker**

Kyocera

Handset Model Name FCC ID

S2100 Luno OVF-K5502

#### Air Interfaces/Frequency Bands

850 MHz CDMA 1900 MHz CDMA

#### **Dates**

This handset model was offered from: 01/14 to 12/14

#### **Ratings**

M-Rating: M4
T-Rating: T4

Did this handset meet the criteria for an M3 rating for operations over GSM at 1900 MHz by enabling the user optionally to reduce the maximum power at which the handset will operate by no more than 2.5 decibels, except for emergency calls to 911?

# **Functionality Level**

**DE MINIMIS** 

Remarks

# Certification

## This Report has been certified by:

Alan Wehe President 01/08/2015 11:47 AM